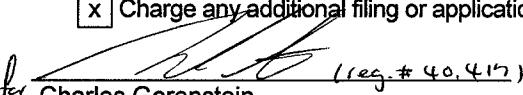


AMENDMENT TRANSMITTAL LETTER				Docket No. 0033-1085PUS1																																					
Application No. 10/586,131-Conf. #3838		Filing Date July 17, 2006		Examiner C. V. Hicks																																					
Applicant(s): Masao SAITO																																									
DISPLAY APPARATUS, PROGRAM PRODUCT CAUSING COMPUTER TO FUNCTION AS Invention: THE DISPLAY APPARATUS, AND RECORDING MEDIUM STORING THE PROGRAM PRODUCT																																									
MS AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450																																									
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.																																									
CLAIMS AS AMENDED																																									
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 15%;">Claims Remaining After Amendment</th> <th style="width: 15%;">Highest Number Previously Paid</th> <th style="width: 15%;">Number Extra Claims Present</th> <th style="width: 15%;">Rate</th> <th style="width: 15%;"></th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>12</td> <td>- 20 =</td> <td>0</td> <td>x 52.00</td> <td>0.00</td> </tr> <tr> <td>Independent Claims</td> <td>2</td> <td>- 3 =</td> <td>0</td> <td>x 220.00</td> <td>0.00</td> </tr> <tr> <td colspan="5">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td> <td></td> </tr> <tr> <td colspan="5">Other fee (please specify):</td> <td></td> </tr> <tr> <td colspan="5">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</td> <td>0.00</td> </tr> </tbody> </table>							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	12	- 20 =	0	x 52.00	0.00	Independent Claims	2	- 3 =	0	x 220.00	0.00	Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify):						TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
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Total Claims	12	- 20 =	0	x 52.00	0.00																																				
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Multiple Dependent Claims (check if applicable) <input type="checkbox"/>																																									
Other fee (please specify):																																									
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00																																				
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity																																									
<input type="checkbox"/> No additional fee is required for this amendment.																																									
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.																																									
<input type="checkbox"/> A check in the amount of \$ _____ is enclosed.																																									
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																																									
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed.																																									
<input checked="" type="checkbox"/> Credit any overpayment.																																									
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.																																									
 Charles Gorenstein (reg. # 40,417) Attorney Reg. No.: 29,271																																									
Dated: December 29, 2009																																									
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000																																									